



***Cabinet for Health and Family Services (CHFS)
Information Technology (IT) Policy***



**070.400 CHFS Information Technology (IT) Standards,
Policies, and Procedures (SPP) Team Charter Policy**



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070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
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Sign-Off

Sign-off Level	Date	Name	Signature
Executive Advisor (or designee)	10/5/2018	Jennifer Harp	
CHFS Chief Information Security Officer (or designee)	10/5/2018	DENNIS E. LOBER	

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

Table of Contents

1	POLICY DEFINITIONS.....	4
2	POLICY OVERVIEW.....	5
2.1	PURPOSE	5
2.2	SCOPE	5
2.3	MANAGEMENT COMMITMENT.....	5
2.4	COORDINATION AMONG ORGANIZATIONAL ENTITIES	5
2.5	COMPLIANCE	5
3	ROLES AND RESPONSIBILITIES	6
3.1	CHIEF INFORMATION SECURITY OFFICER (CISO)	6
3.2	CHIEF PRIVACY OFFICER (CPO)	6
3.3	SECURITY/PRIVACY LEAD	6
3.4	CHFS CONTRACT, STATE, AND VENDOR STAFF/PERSONNEL	6
3.5	SPP CHARTER TEAM MEMBERS.....	6
4	POLICY REQUIREMENTS	7
4.1	GENERAL	7
4.2	MEMBERSHIP OF OATS SPP CHARTER TEAM.....	7
4.3	FREQUENCY OF TEAM MEETINGS.....	7
4.4	APPROVAL PROCESS FOR DOCUMENT REVIEW AND IMPLEMENTATION	8
4.5	REVIEW AND MINOR UPDATES TO DOCUMENTS	8
5	POLICY MAINTENANCE RESPONSIBILITY	8
6	POLICY EXCEPTIONS	9
7	POLICY REVIEW CYCLE.....	9
8	POLICY REFERENCES	9

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

1 Policy Definitions

- **Confidential Data:** COT standards define confidential data as the data the Commonwealth has a legal obligation to not disclose. This data requires the highest levels of restrictions, because of the risk or impact that will result from disclosure, modifications, breach, or destruction of that data. Examples include, but are not limited to, data not releasable under the Kentucky State law, Protected Health Information, Federal Tax Information, and Social Security and Credit Card Numbers.
- **Contract Staff/Personnel:** An employee hired through a state approved (i.e. System Design/Development Services {SDS} Vendor Agreement/Company) vendor who has a master agreement with the state.
- **Electronic Personal Health Information (ePHI):** Any protected health information (PHI) that is covered under Health Insurance Portability and Accountability Act of 1996 (HIPAA) security regulations and is produced, saved, transferred, or received in an electronic form.
- **Federal Tax Information (FTI):** Information received from the Internal Revenue Service (IRS) or secondary source, such as SSA, Federal Office of Child Support Enforcement or Bureau of Fiscal Service, that includes tax information. Examples would be an individual's tax return or anything that the IRS collects and that the IRS is going to use in order to determine a person's tax liability or potential tax liability.
- **Personally Identifiable Information (PII):** Information that can be used to distinguish or trace an individual's identity (i.e. name, Social Security number, biometric records, etc.). PII can be the individual's personal information or is identified when combined with other personal or identifiable information (i.e. date of birth, birth place, mother's maiden name, etc.).
- **Sensitive Data:** Defined by COT standards, is data that is not legally protected, but should not be considered public information and only be disclosed under limited circumstances. Only authorized users should be granted access to sensitive data. Examples include, but are not limited to, information identifiable to an individual (i.e. dates of birth, driver's license numbers, employee ID numbers, license plate numbers, and compensation information) and Commonwealth proprietary information (i.e. intellectual property, financial data, and more.)
- **State Staff/Personnel:** An employee hired directly through the state within the CHFS.
- **Vendor Staff/Personnel:** An employee contracted through an approved Master Business Associate Agreement, or other formal agreement, to provide temporary work for CHFS.

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

2 Policy Overview

2.1 Purpose

The Cabinet for Health and Family Services (CHFS) Office of Administrative and Technology Services (OATS) must establish a comprehensive level of security controls when reviewing, updating, creating, and retiring Information Technology (IT) documents, through a defined and approved Team Charter Group. This document establishes the agency's IT Standards, Policies, and Procedures (SPP) Team Charter Policy to manage risks and provide guidelines for security best practices regarding OATS IT policy and procedure documents.

2.2 Scope

The scope of this policy applies to all internal CHFS state, contract, and vendor staff/personnel, temporary personnel, third party providers under contract with a CHFS agency, and other entities that interact with CHFS information related resources. This policy covers the applicable computer hardware, software, application, configuration, business data, and data communication systems.

2.3 Management Commitment

OATS Division Directors, the CHFS Chief Technical Officer (CTO), Chief Information Security Officer (CISO), and IT Executive Advisor have reviewed and approved this policy. Senior Management supports the objective put into place by this policy. Violations of not abiding by this policy may result in disciplinary action, which may include suspension, restriction of access, or more severe penalties up to and including termination of employment. CHFS shall report illegal activities or theft of CHFS property (physical or intellectual) to the appropriate authorities.

2.4 Coordination among Organizational Entities

OATS coordinates with organizations and/or agencies with the cabinet, which access applications, systems, and facilities. All organizational entities that interact with CHFS are subject to follow requirements outlined within this policy.

2.5 Compliance

As the official guidance domain for this policy, CHFS agencies abide by the security and privacy requirements established in applicable state laws and regulations as well as federal guidelines outlined in the National Institute of Standards and Technology (NIST). Applicable agencies additionally follow security and privacy frameworks outlined within the Centers for Medicare and Medicaid Services (CMS), the Internal Revenue Services (IRS), and the Social Security Administration (SSA).

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

3 Roles and Responsibilities

3.1 Chief Information Security Officer (CISO)

Individual responsible for providing guidance and direction in assessment, planning, and implementation of all security standards, practices, and commitments required. This individual is responsible to adhere to this policy.

3.2 Chief Privacy Officer (CPO)

An individual responsible for overseeing activities related to the development, implementation, maintenance of, and adherence to the Cabinet's and Commonwealth's information privacy and confidentiality policies and procedures in compliance with federal and state laws. This individual will conduct Health Insurance Portability and Accountability Act (HIPAA) risk analysis through coordination with the Information Security Agency Representative, the CISO, or CHFS OATS Information Security (IS) Team, and other CHFS agencies, and will ensure compliance with HIPAA notification and reporting requirements in the event of an identified breach.

3.3 Security/Privacy Lead

Individual(s) designated by the division leadership to coordinate privacy and/or security issues and incidents with all appropriate staff/personnel. This individual(s) is responsible for providing privacy and security guidance and direction for protection of Personally Identifiable Information (PII), Electronic Personal Health Information (ePHI), Federal Tax Information (FTI) and other sensitive information to all CHFS staff/personnel. This role along with the CHFS OATS IS Team is responsible for adherence to this policy.

3.4 CHFS Contract, State, and Vendor Staff/Personnel

All CHFS contract, state, and vendor staff/personnel must adhere to this policy. All staff/personnel must comply with referenced documents, found in section [8 Policy References](#) below that pertain to the agency's applications, application servers, appliances, operating systems, web servers, network components, and database (server or components) that reside on CHFS/OATS information system(s).

3.5 SPP Charter Team Members

Individuals designated by the division leadership to coordinate and participate in monthly meetings and discussion to improve, review, and update OATS IT documentation. These individuals are comprised from all divisions within OATS for input. These individuals are reviewed on an annual basis and additional OATS staff may be added as needed for input on IT documentation.

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

4 Policy Requirements

4.1 General

The OATS SPP Charter Team oversees the development and maintenance of CHFS IT standards, policies, and procedures. CHFS follows all Enterprise standards, policies, and procedures as published by the Commonwealth Office of Technology (COT). The SPP Charter Team's objective is to establish IT documents that meet state and federal regulation requirements (i.e. NIST, CMS, IRS, SSA, etc.) through the application of Enterprise and CHFS OATS IT documents. This group is responsible for the review, updates, and approvals of OATS IT standards, policies, and procedures. The group reviews OATS standards on an as a needed basis while the OATS policies and procedures are reviewed on an annual basis.

4.2 Membership of OATS SPP Charter Team

The OATS SPP Charter Team is comprised of members within various divisions housed in CHFS OATS. The SPP Charter Team members consist of staff from the following areas:

- Division of Eligibility Systems (DES) Member(s)
- Division of Facilities Management (DFM) Member(s)
- Division of General Accounting (DGA) Members(s)
- Division of Medicaid Systems (DMS) Member(s)
- Division of Procurement and Grant Oversight Services (DPGOS) Member(s)
- Division of Social Support Systems (DSSS) Member(s)
- Division of Strategic Services (DSS) Member(s)
- OATS Information Security (IS) and Compliance Team Member(s)
- Non-voting Administrative Organizer
- Additional Non-Voting OATS Member(s)

SPP Charter team members are reviewed on an annual basis, or more often if needed, to ensure appropriate division personnel throughout OATS are represented appropriately. The SPP Team Charter will review and vote/agree upon changes to the SPP group membership during this annual review. Additional OATS staff may be a part of review/updates as deemed necessary but may not be a formal voting member. These additional OATS staff, will provide information/input to assist in ensuring IT documentation is as accurate as possible.

4.3 Frequency of Team Meetings

The SPP Charter Team meets (via teleconference, in person, or email) on a monthly basis, however, the team may elect to meet more frequently if required by the workload.

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

4.4 Approval Process for Document Review and Implementation

All CHFS IT policies are approved by following the process as outlined below:

- CHFS SPP Team Charter meets on a monthly basis to review, update, and comment on selected policies.
- Policies must be approved by a majority of the voting members on the SPP Charter Team.
- Policies are then reviewed and approved by a majority of the OATS Division Directors, or designee(s).
- Policies are then reviewed, approved, and if applicable signed, by the CHFS Chief Information Security Officer (CSO/CISO) and/or CHFS Chief Technical Officer (CTO).
- Vetted and approved policies then reviewed, approved, and signed by the IT Executive Advisor, or designee.
- The Charter Team Non-Voting Administrative Organizer is then responsible for ensuring that approved IT documents are posted to the CHFS website, the OATS intranet, or designated published place, as they are reviewed, approved, updated, signed, and implemented.

4.5 Review and Minor Updates to Documents

Enterprise level policies, procedures, and processes are reviewed within the Commonwealth Office of Technology (COT) at least every two to three years. CHFS OATS IS Team will annually review applicable enterprise documentation (i.e. Policies, procedures, plans, etc.) for compliance. If updates are deemed necessary for update or discussion, the OATS IS team will bring comments to the SPP team, and or management, for formal suggestions or information to be provided to COT for updates that need to be made.

It is the OATS IS team's responsibility to review all OATS documents (i.e. policies, procedures, plans, etc.) at least once annually. For major updates needed to OATS documents, the formal SPP review process will occur. For minor updates needed to OATS documents, the OATS IS Team will review compliance regulations and obtain management approval for updates without having to complete the SPP formal review and approval process.

5 Policy Maintenance Responsibility

The OATS IS Team is responsible for the maintenance of this policy.

070.400 CHFS IT Standards, Policies, and Procedures (SPP) Team Charter Policy	Current Version: 2.3
070.400 Documentation Maintenance	Review Date: 10/05/2018

6 Policy Exceptions

Any exceptions to this policy must follow the guidance established in CHFS OATS Policy: 070.203- Security Exceptions and Exemptions to CHFS OATS Policies and Security Control Policy.

7 Policy Review Cycle

This policy is reviewed at least once annually, and revised on an as needed basis.

8 Policy References

- Centers for Medicare and Medicaid Services (CMS) MARS-E 2.0
- CHFS OATS IT Charter Team Charter Members Document
- CHFS OATS IT Policies
- CHFS OATS IT Standards
- CHFS OATS Policy: 070.203- Security Exceptions and Exemptions to CHFS OATS Policies and Security Control Policy
- Internal Revenue Services (IRS) Publication 1075
- Kentucky Revised Statute (KRS) Chapter 61.878 Certain public records exempted from inspection except on order of court – Restriction of state employees to inspect personnel files prohibited
- National Institute of Standards and Technology (NIST) Special Publication 800-53 Revision 4, Security and Privacy Controls for Federal Information Systems and Organizations
- Social Security Administration (SSA) Security Information